

00-*R*-1044

Entered - 10-21-99 - sb  
CL99L0690 - DOBBS JORDAN

CLAIM OF: Lauren A. Standish  
1106 Austin Avenue, NE  
Atlanta, Georgia 30307

For damages alleged to have been sustained  
as a result of a property damage incident on  
August 15, 1999 at 1117 Austin Avenue.

THIS ADVERSED REPORT IS  
APPROVED

BY: *Rosalind Rubens Newell*  
ROSALIND RUBENS NEWELL  
DEPUTY CITY ATTORNEY

CONSENT AGENDA

ADVERSED BY JUL 17 2000  
CITY COUNCIL

ADVERSED REPORT

*P.S. & L.N*

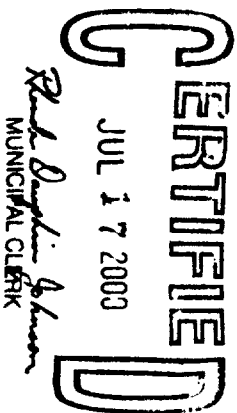
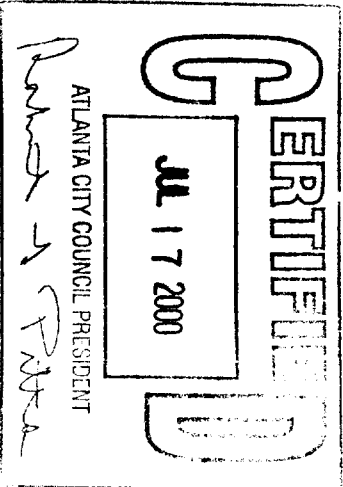
*7/11/00*

*E.T. Martin*

*Colt Jackson*

*James*

*Jeffrey H. Hester*





## OFFICE OF MUNICIPAL CLERK

RHONDA DAUPHIN JOHNSON, CMC  
MUNICIPAL CLERK

55 TRINITY AVENUE, S.W.  
SECOND FLOOR, EAST  
SUITE 2700  
ATLANTA, GEORGIA 30335  
(404) 330-6033  
FAX (404) 658-6103

July 28, 2000

Lauren A. Standish  
1106 Austin Ave., NE  
Atlanta, GA 30307

00-R-1044

Dear Ms. Standish:

I sincerely regret that you have been adversely affected by the circumstances raised in your claim for damages against the City of Atlanta. Your time and patience in this matter has been greatly appreciated.

However, I must notify you that the Atlanta City Council Adopted an Adverse Report on your claim at its regular meeting on July 17, 2000. In consultation with the City's Law Department, who conducted an investigation of the situation, the Council has determined that the City cannot accept responsibility for this matter and therefore cannot pay this claim.

If you desire any further information, please contact the City Attorney's Office/Claims Division at (404) 330-6400.

Sincerely,

Rhonda Dauphin Johnson, CMC  
Municipal Clerk

cc: Claims Division/Law Department

## DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. 99L0690

Date: June 26, 2000

Claimant /Victim Lauren A. Standish  
BY: (Atty) (Ins. Co.) \_\_\_\_\_  
Address: 1106 Austin Avenue NE, Atlanta, Georgia 30307  
Subrogation: \_\_\_\_\_ Claim for Property damage \$ 1229.31 Bodily Injury \$ \_\_\_\_\_  
Date of Notice: 10-7-99 Method: Written, Proper X Improper \_\_\_\_\_  
Conforms to Notice: O.C.G.A. §36-33-5 X Ante Litem (6 Mo.) X  
Date of Occurrence 8-15-99 Place: 1117 Austin Avenue  
Department Parks, Recreation and Cultural Affairs Division Parks  
Employee involved \_\_\_\_\_ Disciplinary Action: \_\_\_\_\_

NATURE OF CLAIM: Claimant's vehicle sustained property damage when a city tree fell onto the claimant's parked vehicle. An investigation determined that the city did not have any prior notice regarding dead limbs or other problems at this location. The city is immune from liability as set forth in O.C.G.A. § 36-33-1.

### INVESTIGATION:

Statements: City employee \_\_\_\_\_ Claimant \_\_\_\_\_ Others \_\_\_\_\_ Written \_\_\_\_\_ Oral \_\_\_\_\_  
Pictures \_\_\_\_\_ Diagrams \_\_\_\_\_ Reports: Police \_\_\_\_\_ Dept Report X Other \_\_\_\_\_  
Traffic citations issued: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_  
Citation disposition: City Driver \_\_\_\_\_ Claimant Driver \_\_\_\_\_

### BASIS OF RECOMMENDATION:

Function: Governmental X Ministerial \_\_\_\_\_  
Improper Notice \_\_\_\_\_ More than Six Months \_\_\_\_\_ Other \_\_\_\_\_ Damages reasonable \_\_\_\_\_  
City not involved \_\_\_\_\_ Offer rejected \_\_\_\_\_ Compromise settlement \_\_\_\_\_  
Repair/replacement by Ins. Co. \_\_\_\_\_ Repair/replacement by City Forces \_\_\_\_\_  
Claimant Negligent \_\_\_\_\_ City Negligent \_\_\_\_\_ Joint \_\_\_\_\_ Claim Abandoned \_\_\_\_\_

Respectfully submitted,

  
INVESTIGATOR - DOBBS JORDAN

### RECOMMENDATION:

Pay \$ \_\_\_\_\_ Adverse X Account charged: 1A01 \_\_\_\_\_ 2J01 \_\_\_\_\_ 2H01 \_\_\_\_\_  
Claims Manager:  Concur/date 06-26-00  
Committee Action: \_\_\_\_\_ Council Action \_\_\_\_\_

COUNCIL OF THE CITY OF ATLANTA  
CLERK OF COUNCIL  
City Hall  
55 Trinity Street, S.W.  
Atlanta, Georgia 30335

RE: CLAIM FOR DAMAGES

OCT - 7 1999

Today's Date 10/11/99

*Jordan*  
10/18/99  
*Du*

Dear Clerk of Council:

MUNICIPAL

ENTERED - 10-21-99 - SB  
99L0690 - DOBBS JORDAN

This is to notify the City of Atlanta that I have suffered damages in the amount sum of \$ \$1229.31 property and/or \$ \_\_\_\_\_ bodily injury for which I contend the City is liable.

1. Date of incident 8/15/99  
(month/day/year)
2. Police called: X  
Yes No
3. Location of incident 1117 Austin Ave
4. Name of your insurance company: Geico Policy No. 21-87-86
5. State what and how incident occurred: A Bradford Pear planted in Street R.O.W.  
Split and fell on truck causing damages.

6. ALL ESTIMATES AND DAMAGES ARE SUBJECT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILL RESULT IN YOUR CLAIM BEING DENIED AND MAY RESULT IN CRIMINAL PROSECUTION!
7. The registered owner must make the claim for vehicle damages, complete the following and attach two (2) estimates of repair and proof of ownership of your vehicle (copy of the current tag receipt or title).
- |               |             |                      |                     |                        |
|---------------|-------------|----------------------|---------------------|------------------------|
| Your vehicle  | <u>FORD</u> | <u>96/97</u>         | <u>251 MTA</u>      | <u>Lauren Standish</u> |
|               | (make)      | (year)               | (tag number)        | (driver's name)        |
| City vehicle: | _____       | _____                | _____               | _____                  |
|               | (make)      | (City driver's name) | (department/bureau) |                        |
8. Witness Susan Chu 1106 Austin Ave 404-523-2234  
(name) (address) (telephone number)
9. The acknowledgement of this claim in no way waives the Governmental Immunity of the City of Atlanta, as granted by State law, nor is it an admission of liability on behalf of the City of Atlanta and/or its employee(s).
10. This claim should be mailed immediately to the address shown above.

I HEREBY SWEAR OR AFFIRM THAT THE ABOVE INFORMATION IS TRUE AND CORRECT.

Lauren A. Standish  
(claimant's name)  
1106 Austin Ave NE  
(address)  
Atlanta, GA 30307  
(city and state)  
404-248-1960 404-523-2234  
(work number) (home number)

00- *R* -1044